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SIPDIS

SENSITIVE

FOR CA/OCS/ACS/EAP; EAP/EX; EAP/BCLTV
BANGKOK FOR RMO, CDC
STATE PASS HHS
USDA FOR FAS/PASS TO APHIS

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SUBJECT: VIETNAM - AVIAN FLU UPDATE #1

SUMMARY

1. (U) There are currently 48 human cases including 18 deaths under investigation in Vietnam's avian influenza outbreak. The work of the WHO/CDC team was delayed due to the Tet (Lunar New Year) holidays, but preliminary exploration of the extent of the outbreak has begun, and support for their efforts is expected to increase as the holidays come to a close. The team's major concerns at this point are to control the outbreak in poultry and identify and implement measures to protect the public. To accomplish this, the team aims to determine the extent of H5 infection in humans, identify the mechanisms of transmission, explore any evidence of human-to-human spread, and improve laboratory capacity to identify H5N1 influenza virus. End summary.

CURRENT STATUS

2. (U) A six-person team of experts from the Centers for Disease Control and Prevention (CDC) arrived in Vietnam on January 19th at the invitation of the GVN to support World Health Organization (WHO) activities related to the avian influenza outbreak in Vietnam. As of the morning of January 26th, there are 48 human cases and 18 deaths under investigation. Of these, laboratory tests have confirmed the presence of the H5N1 virus in 7 cases (6 deaths and 1 presently hospitalized in HCM city). The two most recent cases are in children in HCMC. Due to limited epidemiologic surveillance, it seems likely that there are more cases in country that have not yet been identified.

WHO/CDC ACTIVITIES

3. (U) The Tet holidays delayed many of the efforts of the WHO/CDC team over the past week. Only a skeleton staff in the GVN laboratory was made available to the team during the past week. Tet holidays and related closure of government facilities have also delayed the completion of confirmatory diagnostic laboratory testing in Hong Kong. The WHO/CDC team requested two visits to affected poultry farms. The CDC scientists traveled to one affected poultry farm in a province just outside of Hanoi on Jan 25. This farm had seen the loss of more than 90% of its ducks and chickens in the preceding 10 days. Tests conducted by these scientists have confirmed avian influenza as the cause of this outbreak. The visit to the second farm was cancelled at the last minute with no explanation. Tet ends on January 26, and WHO/CDC anticipate much greater cooperation and support to begin in the next few days.

4. (U) The closure of the Customs office over Tet also resulted in delays in access to a supply of Personal Protective Equipment (PPE) a warehouse in the port in Hai Phong. This PPE had originally been ordered in preparation for the possible return of SARS, but is now needed by those culling infected poultry. WHO/CDC anticipates the clearance of that shipment later this week, and further shipments will arrive and be cleared over the next couple of weeks.

CURRENT CONCERNS

5. (U) A number of significant concerns at this time revolve around the culling of poultry. First, is large-scale culling even being performed? Figures released last week by the GVN group poultry deaths due to culling and to avian influenza in one category. It is therefore unclear how many birds have actually been culled. The figures indicate that of the approximately 254 million domestic

poultry in Vietnam, about 2 million have died. Given the mortality rates among poultry and the spread of the disease, it is likely that the majority of those 2 million deaths were due to disease and not culling. There are indications that culling efforts are more aggressive in southern Vietnam, but these efforts do not appear to be sufficient in proportion to the outbreak. Secondly, are those performing the culling using adequate protection? The Ministry of Agriculture indicates that there are at least six thousand workers involved in the culling and disposal of deceased poultry. It is safe to say that the majority of these workers have not been provided adequate protective equipment to reduce the risk of infection. The existence of numerous small, non-commercial farms in rural areas poses a further challenge to culling efforts. The USDA US Animal and Plant Health Inspection Service (US APHIS) is providing technical consultation to advise on proper culling procedures. A USDA expert may be asked to join the team in coming days.

16. (U) Incentives to cull are also inadequate. While the market rate for a healthy chicken is 40,000 VND (USD 2.58), farmers are being compensated only 5,000 VND (USD 0.33) for deceased birds, and 15,000 VND (USD 0.97) for living birds surrendered for culling. Given the low level of compensation, there is incentive for many farmers to sell off living chickens and/or wait to see if some of their birds survive the infection. The UN's Food and Agriculture Organization will contribute \$400,000 USD in financial assistance, some of which will be used to provide increased incentives for farmers to surrender poultry for culling.

17. (U) Human-to-human transmission remains a major concern. While human-to-human transmission is not confirmed in any of the 48 cases currently under investigation, CDC and WHO experts believe such transmission between close contacts (e.g. family members) is likely to happen in the future if it has not already. Of concern is whether transmission of the avian influenza virus may become possible through casual contact. According to WHO/CDC, this worst-case scenario is what epidemiologists call "sustained community transmission", meaning that the disease is spread extensively through casual contact. The result would most likely be an global influenza epidemic (pandemic).

18. (U) Finally, laboratory services to confirm cases currently under investigation are limited in Vietnam. The National Institute for Hygiene and Epidemiology (NIHE) and the National Center for Veterinary Diagnostics (NCVD) are inadequately prepared to perform the number and types of complex testing required in both livestock and humans in order to appropriately study and advise on containment of this outbreak. The WHO/CDC team is trying to improve this situation.

REGIONAL COOPERATION

19. (U) As the outbreak continues to spread in Vietnam and across Eastern and Southeastern Asia, regional cooperation becomes essential. Officials in Vietnam hope that the January 28, ministerial level meeting of ASEAN + 3 countries, plus the US and EU, in Bangkok will bolster cooperation. We understand that efforts are underway in Thailand to arrange a technical expert-level meeting to follow the ministerial level talks.
BURGHARDT